Case 23-20084-rlj7 Doc 29-9 Filed 05/22/23 Entered 05/22/23 14:48:08 Desc Exhibit I UCC1 Financing Statements Page 1 of 34

EXHIBIT I

UCC FINANCING STATEMENT

Name and address of filer:

Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071

2019-3035893-63.01 Kentucky Secretary of State

File Date 7/31/2019 1:21:41 PM

Status Active Fee \$5.00

This document is a representation of a filing made electronically at the Kentucky Secretary of State's web site

DEBTOR'S EXACT FULL LEGAL NAME			
a. ORGANIZATION'S NAME			
7M Cattle Feeders, Inc.			
b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
c. MAILING ADDRESS	CITY	POSTAL CODE	COUNTRY
824 Mullins Lane	Benton	KY 42055	USA
SECURED PARTY'S NAME (or NAME of ASSI	GNEE of ASSIGNOR SECURED PARTY)		
a. ORGANIZATION'S NAME			
Rabo AgriFinance LLC			
b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
c. MAILING ADDRESS	CITY	POSTAL CODE	COUNTRY
P.O. Box 411995	St. Louis	MO 63141	USA

All Assets

^{4.} This FINANCING STATEMENT covers the following collateral:

A. NAME &	PHONE OF CONTACT AT FILER (optional e: (800) 331-3282 Fax: (818) 662-4141)				036274-97.	01
	CONTACT AT FILER (optional) CTLS_Glendale_Customer_Service@w	olterskluwer cor	n		Kentucky 8	Secretary of State	DM
_	CKNOWLEDGMENT TO: (Name and Addre				Status	8/1/2019 4:30:00 Active	PIVI
_		04// - KAD	I	1.3	Fee Filer	\$20.00 dwilliams	
P.O.	Solutions Box 29071	7103			i lici	dwilliams	
Glen	dale, CA 91209-9071	KYK	(
1			T				
_	File with: Secretary of S	tate, KY		THE ABOVE	SPACE IS F	OR FILING OFFICE U	SE ONLY
	R'S NAME: Provide only one Debtor name (1a of tit in line 1b, leave all of item 1 blank, check he						
	ANIZATION'S NAME	and provide	the individual Debtot inic	mation in item 10 or in	e Financing St	atement Addendum (Form	OGG1Ad)
1	attle Feeders, Inc.		敖				
1b. INDIVI	IDUAL'S SURNAME	-	FIRST PERSONAL NAM	E	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
			1				
MAILING AD	DDRESS		CITY	33,70	STATE	POSTAL CODE	COUNTRY
24 Mullin DEBTOR ame will no 2a. ORGA	AS Lane R'S NAME: Provide only one Debtor name (2a of fit in line 2b, leave all of item 2 blank, check he INIZATION'S NAME						
2a. ORGA McCla	ns Lane 2'S NAME: Provide only one Debtor name (2a of fit in line 2b, leave all of item 2 blank, check he		Benton name; do not omit, modi	rmation in item 10 of th	KY art of the Debto se Financing Sta	42055 r's name); if any part of the	USA Individual Debt
24 Mullin DEBTOR name will no 2a. ORGA McCla	IS Lane R'S NAME: Provide only one Debtor name (2a of fit in line 2b, leave all of item 2 blank, check he ANIZATION'S NAME ain Feed Yard, Inc. IDUAL'S SURNAME		Benton I name; do not omit, modi	rmation in item 10 of th	KY art of the Debto se Financing Sta	42055 r's name); if any part of the atement Addendum (Form	USA Individual Debt UCC1Ad)
24 Mullin DEBTOR	IS Lane I'S NAME: Provide only one Debtor name (2a of fit in line 2b, leave all of item 2 blank, check he ANIZATION'S NAME AIN Feed Yard, Inc. IDUAL'S SURNAME		Benton I name; do not omit, modi the Individual Debtor info	rmation in item 10 of th	KY art of the Debto se Financing Sta	42055 r's name); if any part of the atement Addendum (Form	USA Individual Debt UCC1Ad)
24 Mullin DEBTOR	IS Lane A'S NAME: Provide only one Debtor name (2a of fit in line 2b, leave all of item 2 blank, check he ANIZATION'S NAME ain Feed Yard, Inc. IDUAL'S SURNAME DDRESS IS Lane ED PARTY'S NAME (or NAME of ASSIGNEE)	re	Benton I name; do not omit, modithe Individual Debtor info	rmation in item 10 of th	KY art of the Debto se Financing Sta ADDITION STATE KY	42055 r's name); if any part of the atement Addendum (Form NAL NAME(S)/INITIAL(S) POSTAL CODE 42055	USA Individual Debt UCC1Ad) SUFFIX COUNTRY
24 Mullin DEBTOR	IS Lane A'S NAME: Provide only one Debtor name (2a of fit in line 2b, leave all of item 2 blank, check he ANIZATION'S NAME ain Feed Yard, Inc. IDUAL'S SURNAME DDRESS IS Lane ED PARTY'S NAME (or NAME of ASSIGNEE ANIZATION'S NAME)	re	Benton I name; do not omit, modithe Individual Debtor info	rmation in item 10 of th	KY art of the Debto se Financing Sta ADDITION STATE KY	42055 r's name); if any part of the atement Addendum (Form NAL NAME(S)/INITIAL(S) POSTAL CODE 42055	USA Individual Debt UCC1Ad) SUFFIX COUNTRY
24 Mullin DEBTOR	IS Lane A'S NAME: Provide only one Debtor name (2a of fit in line 2b, leave all of item 2 blank, check he ANIZATION'S NAME ain Feed Yard, Inc. IDUAL'S SURNAME DDRESS IS Lane ED PARTY'S NAME (or NAME of ASSIGNEE)	re	Benton I name; do not omit, modithe Individual Debtor info	rmation in item 10 of the	ADDITION STATE KY name (3a or 3)	42055 r's name); if any part of the atement Addendum (Form NAL NAME(S)/INITIAL(S) POSTAL CODE 42055	USA Individual Debt UCC1Ad) SUFFIX COUNTRY
24 Mullin DEBTOR	IS Lane A'S NAME: Provide only one Debtor name (2a of fit in line 2b, leave all of item 2 blank, check he anization's name ain Feed Yard, Inc. IDUAL'S SURNAME DDRESS IS Lane ED PARTY'S NAME (or NAME of ASSIGNEE ANIZATION'S NAME AGRIFINANCE LLC AGRIFINANCE LLC	re	Benton I name; do not omit, modithe Individual Debtor information FIRST PERSONAL NAM CITY Benton URED PARTY): Provide of	rmation in item 10 of the	ADDITION STATE KY name (3a or 3)	42055 r's name); if any part of the atement Addendum (Form NAL NAME(S)/INITIAL(S) POSTAL CODE 42055 b)	USA Individual Debt UCC1Ad) SUFFIX COUNTRY USA
24 Mullin DEBTOR	IS Lane IS NAME: Provide only one Debtor name (2a of fit in line 2b, leave all of item 2 blank, check he anization's name ain Feed Yard, Inc. IDUAL'S SURNAME DDRESS IS Lane ID PARTY'S NAME (or NAME of ASSIGNEE ANIZATION'S NAME AgriFinance LLC IDUAL'S SURNAME	re	Benton I name; do not omit, modithe Individual Debtor info	rmation in item 10 of the	ADDITION STATE KY name (3a or 3)	42055 r's name); if any part of the atement Addendum (Form NAL NAME(S)/INITIAL(S) POSTAL CODE 42055 b)	USA Individual Debt UCC1Ad) SUFFIX COUNTRY USA

5. Check only if applicable and che	ck only one box: Collateral is held in	a Trust (see UCC1Ad, item 17 an	d Instructions)	being administered by a De	cedent's Personal Representative
6a. Check only if applicable and ch	eck only one box:			6b. Check only if applicable	and check only one box:
Public-Finance Transaction	Manufactured-Home Transa	ction A Debtor is a Transr	mitting Utility	Agricultural Lien	☐ Non-UCC Filing
7. ALTERNATIVE DESIGNATION	if applicable): Lessee/Lessor	Consignee/Consignor	Seller/Buye	Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE 71038283	DATA: 22117434	*		7M Cattle Fe	eeders, Inc.

EXHIBIT A

McClain MCA 2018 UCC-1 FINANCING STATEMENT FILING INFORMATION

- (a) all buildings, structures, improvements, fixtures, attachments, appliances, equipment, machinery and other articles now or hereafter erected on, affixed or attached to, or located in or on the real estate and any interest in the real estate located in Deaf Smith and Parmer Counties, Texas, and described in EXHIBIT B-2 (the "Land"), including all wells, watering and irrigation apparatus, pumps, motors, generators, pipes, center pivot irrigators and sprinklers, windmills, and fences (the "Improvements");
- (b) all easements, rights-of-way and rights appurtenant to the Land or used in connection with the Land or as a means of access thereto ("Easements");
- the ground water on, under, pumped from or otherwise available to the Collateral or any drainage, retention, ditch, canal, reservoir, or other water rights, whether as a result of overlying groundwater rights, contractual rights, or otherwise and whether riparian, appropriative, or otherwise; the right to remove or extract any such ground water including any permits, rights or licenses granted by any nation or government, any state or other political subdivision thereof, any agency, authority, instrumentality, regulatory body, court, administrative tribunal, central bank or other entity exercising executive, legislative, judicial, taxing, regulatory or administrative powers or functions of or pertaining to government ("Governmental Authority") and any rights granted or created by any easement, covenant, agreement or contract with any Person; and any rights to which the Collateral or Debtor is entitled with respect to surface water, whether such rights are appropriative, riparian, prescriptive or otherwise and whether or not pursuant to historical use, contractual agreement, permit or other governmental authorization; any water right, water allocation for water not yet delivered, distribution right, delivery right, any proscriptive, contractual, easement or other rights necessary or convenient to convey any water to the Collateral, water storage right, or other water-related entitlement appurtenant to or otherwise applicable to the Collateral by virtue of the Collateral being situated within the boundaries of any governmental water district irrigation district or other local agency or within the boundaries of any private water company, mutual water company, or other non-governmental entity (collectively, "Water Rights")
 - (d) all other tenements, hereditaments and appurtenances to the Land;
- (e) minerals, oil, gas, coal, metallic ores, other minerals and any other hydrocarbon substances, minerals, mineral interests, royalties, overriding royalties, production payments, net profit interests and other interests and other interests and estates in, under and on the Land and other oil, gas, coal, metallic ores and any other mineral interests with which any of the foregoing interests or estates are pooled or unitized, including surface damage awards or settlements (the "Mineral Rights");
 - (f) timber now or hereafter standing or cut;
- (g) leases, subleases, licenses, occupancy agreements, concessions and other agreements, granting a possessory interest in and to, or the right to extract, mine, reside in, sell, or use the Collateral (collectively, the "<u>Leases</u>");
- (h) all utility contracts, maintenance agreements, management agreements, service contracts and other agreements directly related to the operation and maintenance of the Collateral;
 - (i) all bushes, groves, trees, plants, vines or other plantings, upon or under the Land ("Plantings");
- (j) working drawings, instructional manuals, and rights in processes directly related to the operation of the Collateral, and all other general intangibles described in EXHIBIT C;
- (k) other tangible personal property of every kind and description, whether stored on the Land or elsewhere, including all goods, materials, supplies, tools, books, records, chattels, furniture, machinery and equipment (except motor vehicles, trailers, and planting, tillage and harvesting equipment rolling stock) or which is in all cases (i) directly related to the operation of the Collateral or acquired in connection with any construction or maintenance of the Land or the Improvements, (ii) affixed or installed, or to be affixed or installed, in any manner on the Land or the Improvements, or (iii) described in EXHIBIT C;

McClain MCA 2018 UCC-1 Financing Statement Information

- (I) all permits and licenses relating or pertaining to the use or enjoyment of the Collateral;
- (m) proceeds of and any unearned premiums on any insurance policies covering the Collateral, including the right to receive and apply the proceeds of any insurance, judgments, or settlements made in lieu thereof, for damage to the Collateral (the "Insurance Claims");
- (n) all awards made for the taking by condemnation or the power of eminent domain, or by any proceeding or purchase in lieu thereof, of the whole or any part of the Real Estate (the "Condemnation Awards");
- (o) money or other personal property of Debtor in addition to the foregoing deposited with or otherwise in Beneficiary's, Trustee's or Secured Parties possession;
- (p) rights and interests under any interest rate swap, interest rate caps, interest rate collars or other similar agreement between Debtor and a Swap Counterparty, for the purpose of fixing or limiting interest expense, or any foreign exchange, currency hedging, commodity hedging, security hedging or other agreement between Debtor and Secured Parties or any of their affiliates, for the purpose of limiting the market risk of holding currency, a security or a commodity in either the cash or futures markets, including all rights to the payment of money from Secured Parties or trustee under any deed of trust granted to Secured Parties (the "Trustee") Trustee under the Hedging Agreements; and all accounts, deposit accounts, and general intangibles, including payment intangibles, described in any of the Hedging Agreements;
- (q) the right, in the name and on behalf of Debtor, upon notice to Debtor, to appear in and defend any action or proceeding brought with respect to the Collateral and to commence any action or proceeding to protect the interest of Trustee, Beneficiary or Secured Parties in the Collateral; and
- (r) substitutions, replacements, additions, accessions and proceeds for or to any of the foregoing, and all books, records and files relating to any of the foregoing, including, without limitation, computer readable memory and data and any computer software or hardware reasonably necessary to access and process such memory and data.

EXHIBIT B-1"

McClain MCA 2018
UCC-1 FINANCING STATEMENT FILING INFORMATION

Legal Description of Real Estate

Deaf Smith County, Texas

Tract 2:

A 36.03 acre tract, more or less, out of the Southwest part of Section 26, Block K-8, Abstract No. 1370, Certificate Number 128 of the T. T. R. R. Co. Surveys in Deaf Smith County, Texas, described by metes and bounds as follows:

BEGINNING at a number 60 common nail found for the Southwest corner of Section 26, Block K-8 whence a 1-1/2 inch fron pipe found for the Southeast corner of said section bears North 89 degrees 56 minutes 00 seconds East 5321.58 feet;

THENCE North 89 degrees 56 minutes 00 seconds East along the South line of said section, 48.80 feet to a 1/2 inch iron rod set in the East physical line of Farm Road 1057 for the Southwest and beginning corner of this tract;

THENCE North 00 degrees 12 minutes 00 seconds West along the East physical line of Farm Road 1057, at 30.00 feet pass a 1/2 inch iron rod set for reference and at a total distance of 2587.27 feet a 1/2 inch iron rod set for corner;

THENCE North 89 degrees 54 minutes 43 seconds East 606.84 feet to a 1/2 inch iron rod set in the East line of a tract known as the West 40 acres of the Southwest 1/4 of said section whence a 1/2 inch iron rod set for the Northeast corner of the tract known as the West 40 acres of the Southwest 1/4 of said section bears North 00 degrees 11 minutes 29 seconds West 71.78 feet;

THENCE South 00 degrees 11 minutes 29 seconds East at 2557.50 feet pass a 1/2 inch iron rod set for reference and at a total distance of 2587.50 feet a 1/2 inch iron rod found in the South line of said section for the Southeast corner of the track known as the West 40 acres of the Southwest 1/4 of said section:

THENCE South 89 degrees 56 minutes 00 seconds West along the South line of said section, 606.45 feet to the place of beginning.

Tract 3:

A 20.00 acre tract out of the Southwest part of Section 26, Block K-8, Certificate Number 128 of the T.T R.R. Co. Surveys in Deaf Smith County, Texas, described by metes and bounds as follows:

BEGINNING at a 1/2 inch iron rod with cap marked "RPLS 1848" found in the South line of Section 26 for the Southwest corner and POINT OF BEGINNING of this tract, whence a number 60 common nail found for the Southwest corner of Section 26, Block K-8 bears South 89 degrees 56 minutes 00 seconds West 655.25 feet;

THENCE North 00 degrees 11 minutes 29 seconds West, a distance of 2587.50 feet a fence corner post for the Northwest corner of this tract;

THENCE North 89 degrees 54 minutes 43 seconds East, a distance of 336.69 feet to a 1/2 inch iron rod with cap marked "HBD" set for the Northeast corner of this tract;

THENCE South 00 degrees 11 minutes 29 seconds East, at a distance of 2557.62 feet pass a 1/2 inch iron rod with cap marked "HBD" set for reference, continue for a total distance of 2587.62 feet a point on the South line of Section 26, whence a 1-1/2 inch iron pipe found for the Southeast corner of Section 26 bears North 89 degrees 56 minutes 00 seconds East, 4329.64 feet;

THENCE South 89 degrees 56 minutes 00 seconds West, along the South line of Section 26, a distance of 336.69 feet to the POINT OF BEGINNING.

EXHIBIT B-2"

McClain MCA 2018
UCC-1 FINANCING STATEMENT FILING INFORMATION

Legal Description of Real Estate

Parmer County, Texas

Tract 1:

A tract of land being all of Section 25 and a portion of Section 24 of Charles E. Harding's Subdivision of Capitol League 473 and parts of Capitol Leagues 459, 460, 461, 472 and 474 in Parmer County, Texas, as shown by the map or plat thereof of record in Volume 6, Page 164, Deed Records of Parmer County, Texas, and being described by metes and bounds as follows:

BEGINNING at a 1/2 inch iron rod with camp stamped "Furman RPLS 1959" set for the southwest corner of said Section 25, being the common corner of Sections 25-36-35-26 from whence a 1/2 inch iron rod found for the common corner of sections 27-34-33-28, all in said subdivision bears North 89° 56' 32" west, 10,564.82 feet, the southwest corner of Section 36 and the southeast corner of Section 35 bears South

00° 11' 46" West, 5,281.81 feet, from this point a harrow tooth found as called for in that certain instrument recorded in Volume 225, Page 730, of the Deed Records of Parmer County, Texas, for the Northwest corner of Section 1, Block C of Capitol Syndicate Subdivision in Parmer County, Texas, as shown by Plat thereof of record in Volume 2, Page 495 of said Deed Records bears West (Bearing Basis) 1,411.64 feet;

THENCE North 00° 11' 46" East along the common line of Sections 25 and 26, and the common line of Section 24 and 23, of said Charles E. Harding's Subdivision, and along the center of a road, at 5,281.61 feet pass the common line of Sections 25-26-23-24 a total distance of 8,503.54 feet to a 3/4 inch iron pipe found as called for in that certain instrument recorded in Volume 156, Page 603 of said Deed Records, and in Volume 2, Page 219 of the Field Note Records of Parmer County, Texas, from whence the common corner of Sections 24-23-14-13 of said Charles E. Harding's Subdivision bears North 00° 11' 46" East 5,281.61 feet and 1 1/4 inch iron pipe with 5/8 inch rod adjacent found for the common corner of Sections 12-13-14-11 of said Charles E. Harding's Subdivision, as called for in that certain instrument recorded in Volume 2, Page 343, of said Field Note records bears North 00° 11' 46" East 7,341.28 feet;

THENCE South 89° 40' 58" East 2,100.84 feet along a fence line and along the North line of this tract of land and the North line of that certain tract of land described in said Volume 156, Page 603 and said Volume 2, Page 219 to a 3/4 inch iron pipe found as called for in said Volume 156, Page 603 and said Volume 2, Page 219, said North line being monumented and generally accepted on the ground for over 25 years, from whence the Northeast corner of Section 24 and the Southeast corner of Section 14 of said Charles E. Harding's Subdivision bears North 00° 11' 07" East 7,345.07 feet;

THENCE South 00° 11' 07" West at 3,187.40 feet pass a 3/4 inch iron pipe found, this iron pipe is a monument of record in said Volume 156, Page 603 and said Volume 2, Page 219 for the Southeast corner of Section 24 of said Charles E. Harding's Subdivision, it is however the Professional opinion of this surveyor that this corner lies in the East line of this survey but 26.81 feet North of the actual section corner, at 3,214.21 feet pass what is in my Professional opinion the Southeast corner of Section 24 and the Northeast corner of Section 25 of said Charles E. Harding's Subdivision at 3,301.75 feet pass a 1 1/2 inch iron pipe found as called for in said Volume 156, Page 603 and said Volume 2, Page 219 for the Southwest corner of Section 22 and the Northwest corner of Section 27 in Township 1 North, Range 3 East of a Capitol Syndicate Subdivision as shown by Plat thereof of record in Volume 5, Page 394 of said Deed Records, a total distance of 8,493.86 feet to a point being the Southeast corner of Section 25 and the Northeast corner of Section 36 of said Charles E. Harding's Subdivision from whence the Southeast corner of said Section 36 bears South 00° 11' 07" West 5,279.65 feet from this point a railroad spike found as called for in that certain instrument recorded in Volume 225, Page 730 of the Deed Records of Parmer County, Texas, for the Northwest corner of Section 1, Block C of Capitol Syndicate Subdivision in Parmer County, Texas as shown by Plat thereof record in Volume 2, Page 495 of said Deed Records bears East (Bearing Basis) 1,324.17 feet;

THENCE North 89° 56' 48" West 2,102.46 feet along the South line of Section 25 and the North line of Section 36 of said Charles E. Harding's Subdivision to the POINT OF BEGINNING and containing 410.0 acres of land, more or less.

EXHIBIT C

McClain MCA 2018
UCC-1 FINANCING STATEMENT FILING INFORMATION

Additional Collateral

associated with DEED OF TRUST by McClain Feed Yard and 7M Cattle Feeders, Inc. on land located in Deaf Smith and Parmer Counties, Texas

(list specific additional Collateral, if any)

<u>Fixtures</u>

Buildings, fixtures, and equipment associated with agricultural production or the productions of farm products, including but not limited to:

Attached Equipment	
2 x Stationary Roto-Mixers	
6 x Liquid Storage Tanks	
9 x Hyd. Working Chutes (Snakes Not I	ncluded)
1 x 12 x 70 Truck Scale	
2 x 12 x 70 Cattle Scales With Fencing	and Gates
I x Grain Probe	

All Water Rights related to but not limited to:

AND 17 1 - 6727	Institute of the	PROFESSION ST. ST. ST.	ells - 410.0 Acre	Tetayara ma	e sine i i i sine se	de sa
Section	District Number	Permit Number	Pennit Szeus	Documents	Recently Tested	Current GPM Estimate
24	79667	3694	Current	Yes	No	40
24	79677	3974	Current	Yes	Yes	64
24	79680	3977	Current	Yes .	Yes	53
24	79681	3978	Current Destroyed	Yes	Yes	0
25	82449	40174	Current	None	No	0
25	79188	3423	Current	Yes	Yes	40
25	79072	3289	Abandoned	Yes	No	0
25	79544	3831	Сштен	Yes	No	40
25	78540	2689	Current	Yeş Mill and Office	No	40
25	79189	3424	Current	Yes	No	40
24	79719	4021	Current	Yes	No	40
25	83148	50106	Corrent	None	No	0
Total				v		357
Total Tested						157 ·

NSTRUCTIONS R PHONE OF CONTACT AT FILER (optional) folders Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 CONTACT AT FILER (optional) ingreturing@wolflerskluwer.com ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Solutions 1 SOLUTIONS 2 SOL		JCC1 Financing State	ments Page 1	L2 of 3	34	esc
INSTRUCTIONS R PHONE OF CONTACT AT FILER (optional) folders Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 CONTACT AT FILER (optional) ingreturing@wolterskluwer.com ACKNOWLEDGMENT TO: (Name and Address) RACKNOWLEDGMENT TO: (Name and Address) ROUTH R	· · · · · · · · · · · · · · · · · · ·					
INSTRUCTIONS R PHONE OF CONTACT AT FILER (optional) folders Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 CONTACT AT FILER (optional) ingreturing@wolterskluwer.com ACKNOWLEDGMENT TO: (Name and Address) RACKNOWLEDGMENT TO: (Name and Address) ROUTH R						
Noters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 CONTACT AT FILER (optional) ingreturing@volterskluwer.com ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Solutions Solution	CC FINANCING STATEMENT					
CONTACT AT FILER (optional) ingreturing/wolferskluwer.com ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Solutions 1 Soluti	NAME & PHONE OF CONTACT AT FILER (optional)	-331-3282 Fax: 818-662-4141				01
Status Active Fee \$10.00 Filler ADevine Solutions Filler ADevine Solutions Filler ADevine THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY RYS NAME: Provide only one Debtor name (1a or 1b) (use exact, full name, do not ornit, modify, or abbreviate any part of the Debtor's name): if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATIONS NAME Cattle Feeders, Inc. INDUAL'S SURNAME FIRST PERSONAL NAME Benton RYS NAME: Provide only one Debtor name (2a or 2b) (use exact, full name, do not ornit, modify, or abbreviate any part of the Debtor's name): if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATION'S NAME Solutions NAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX ADDRESS CITY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY USA CITY STATE POSTAL CODE COUNTRY STATE POS	E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com		Ke	ntucky \$	Secretary of State	PM
ADDITIONAL NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in liem 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATION'S NAME Cattle Feeders, Inc. FIRST PERSONAL NAME Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in liem 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATION'S NAME ADDITIONAL NAME(S)#NITIAL(S) SUFFIX	SEND ACKNOWLEDGMENT TO: (Name and Addres	s) 8477 - RABO	Sta	atus	Active	
File with: Secretary of State, KY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY R'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATION'S NAME Cattle Feeders, Inc. INIDIAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX ADDRESS CITY STATE Benton KY 42025 USA R'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor of fir in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATION'S NAME Citain Farms, Inc. RIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX ADDRESS CITY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY 42025 USA RED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY); Provide only one Secured Party name (3a or 3b) EXCENTANCING NAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX ADDRESS CITY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL	Lien Solutions P.O. Box 29071		- Carrier - Carr			
R'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor (in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATIONS NAME Cattle Feeders, Inc. NIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX ADDRESS CITY STATE POSTAL CODE COUNTRY STATE Benton KY 42025 USA R'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATIONIS NAME Clain Farms, Inc. NIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX ADDRESS CITY STATE POSTAL CODE COUNTRY STATE ADDITIONAL NAME(S)/INITIAL(S) SUFFIX ADDRESS CITY STATE Benton KY 42025 USA ADDITIONAL NAME(S)/INITIAL(S) SUFFIX ADDRESS CITY STATE POSTAL CODE COUNTRY STATE ADDITIONAL NAME(S)/INITIAL(S) SUFFIX SUFFIX ADDRESS CITY STATE ADDITIONAL NAME(S)/INITIAL(S) SUFFIX SUFFIX SUPPLIX	Gieridale, CA 91209-9071	NINI				
R'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor only fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATION'S NAME Cattle Feeders, Inc. NIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX ADDRESS CITY STATE POSTAL CODE COUNTRY USA R'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor only in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATION'S NAME Clain Farms, Inc. INDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX SANIZATION'S NAME CITY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY STATE Benton KY 42025 USA SUFFIX ADDRESS CITY STATE POSTAL CODE COUNTRY STATE STATE POSTAL CODE COUNTRY STATE ST	File with: Secretary of St.	ate, KY	THE ABOVE SPA	CE IS FO	OR FILING OFFICE U	SE ONLY
Cattle Feeders, Inc. INDUAL'S SURNAME PIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX ADDRESS CITY STATE POSTAL CODE COUNTRY Ins Lane Benton KY 42025 USA R'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATION'S NAME Clain Farms, Inc. INDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX ADDRESS CITY STATE POSTAL CODE COUNTRY STATE PO	DEBTOR'S NAME: Provide only one Debtor name (1a o	r 1b) (use exact, full name; do not omit, mo				
ADDITIONAL NAME(S)INITIAL(S) SUFFIX ADDRESS CITY STATE Benton KY 42025 USA R'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATION'S NAME Clain Farms, Inc. INTUDAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY STAT	1a. ORGANIZATION'S NAME	and provide the marriage personal				
ADDRESS CITY STATE Benton KY 42025 USA R'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor toft in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATION'S NAME Clain Farms, Inc. IVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY X 411995 STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY X 411995 ST. Louis MO 63141 USA	7M Cattle Feeders, Inc.	1	·	LADDITIO	IAL NAME (OVALITIAL (O)	Leureix
Benton KY 42025 USA R'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor on the financing Statement Addendum (Form UCC1Ad) SANIZATION'S NAME Clain Farms, Inc. INIDIAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)(INITIAL(S) SUFFIX ADDRESS CITY STATE POSTAL CODE COUNTRY SANIZATION'S NAME OF AGRICATION'S NAME OF AGRICATION NAME OF AGRICATION NAME OF AGRICATION NAME OF AGRICATION NAME (SYNITIAL(S) SUFFIX OF AGRIC	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	ME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
R'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) GANIZATION'S NAME Clain Farms, Inc. RYDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY Benton KY 42025 USA LED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY); Provide only one Secured Party name (3a or 3b) GANIZATION'S NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY Benton KY 42025 USA LED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY); Provide only one Secured Party name (3a or 3b) GANIZATION'S NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX SADDRESS CITY STATE POSTAL CODE COUNTRY X 411995 St. Louis MO 63141 USA ERAL: This financing statement covers the following collateral:	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) SANIZATION'S NAME Clain Farms, Inc. INDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX ADDRESS CITY STATE POSTAL CODE COUNTRY Ins Lane Benton KY 42025 USA RED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) GANIZATION'S NAME FOR AgriFinance LLC INDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME SADDRESS CITY STATE POSTAL CODE COUNTRY SUFFIX SUFFIX SADDRESS STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY MO 63141 USA ERAL: This financing statement covers the following collateral:	24 Mullins Lane	Benton		KY	42025	USA
Ins Lane Benton KY 42025 USA RED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) GANIZATION'S NAME TO AgriFinance LLC DIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINITIAL(S) SUFFIX SADDRESS CITY STATE POSTAL CODE COUNTRY X 411995 St. Louis MO 63141 USA	McClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME		AME			
RED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) GANIZATION'S NAME TO AGRIFINANCE LLC DIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINITIAL(S) SUPFIX SADDRESS CITY STATE POSTAL CODE COUNTRY X 411995 St. Louis MO 63141 USA	MAILING ADDRESS				·	
GANIZATION'S NAME TO AgriFinance LLC DIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINITIAL(S) SUFFIX SADDRESS CITY STATE POSTAL CODE COUNTRY X 411995 St. Louis MO 63141 USA ERAL: This financing statement covers the following collateral:	24 Mullins Lane SECURED PARTY'S NAME (or NAME of ASSIGNEE)		e only one Secured Party na		·	USA
FIRST PERSONAL NAME ADDITIONAL NAME(SYINITIAL(S) SUFFIX ADDITIONAL NAME(SYINITIAL(S) SUFFIX SADDRESS CITY STATE POSTAL CODE COUNTRY X 411995 St. Louis MO 63141 USA ERAL: This financing statement covers the following collateral:	3a. ORGANIZATION'S NAME					
ADDRESS CITY STATE POSTAL CODE COUNTRY x 411995 St. Louis MO 63141 USA ERAL: This financing statement covers the following collateral:	1	I FIRST PERSONAL N	AME	ADDITIO	NAL NAME(SYINITIAL(S)	SUFFIX
x 411995 St. Louis MO 63141 USA ERAL: This financing statement covers the following collateral:						
ERAL: This financing statement covers the following collateral:	MAILING ADDRESS	CITY		STATE		
				MO	63141	USA
	Rabo AgriFinance LLC 3b. INDIVIDUAL'S SURNAME c. MAILING ADDRESS P.O. Box 411995 COLLATERAL: This financing statement covers the following lassets	CITY St. Louis	AME	STATE	POSTAL CODE	
		is held in a Trust (see UCC1Ad, item				
only if applicable and check only one box: 6b. Check only if applicable and check only one box:	Check <u>only</u> if applicable and check <u>only</u> one box: Collateral Check <u>only</u> if applicable and check <u>only</u> one box: Public-Finance Transaction Manufactured-F		6b.	Check <u>only</u>	if applicable and check or	nly one box:

0000030682

8. OPTIONAL FILER REFERENCE DATA:

82554671

Case 23-20084-rlj7 Doc 29-9 Filed 05/22/23 Entered 05/22/23 14:48:08 Desc Exhibit I UCC1 Financing Statements Page 13 of 34

Commonwealth of Kentucky Michael G. Adams, Secretary of State

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

UCC Acknowledgement 2021-3171512-95.1

LIEN SOLUTIONS P.O. BOX 29071 GLENDALE CA 91209-9071

Filing number: File date and time: Status of filing: 2021-3171512-95.1 9/23/2021 4:30:00 PM Active

Actions

 Sequence	Filing Type	/ Fi	ile Date	Status	
1	Initial financing Statem	ent 9/	23/2021 4:30:00 F		
	· · · · · · · · · · · · · · · · · · ·				

Dehtors

Org/Individual	Date Added	Name
Organization	9/23/2021 4:30:00 PM	McClain Feed Yard, Inc.
		824 Mullins Lane
		Benton, KY 42025
Organization	9/23/2021 4:30:00 PM	McClain Farms, Inc.
		824 Mullins Lane
A	0/00/0004 4:00 00 DM	Benton, KY 42025
Organization	9/23/2021 4:30:00 PM	7M Cattle Feeders, Inc. 824 Mullins Lane
		Benton, KY 42025
		DERIUM, NT 4202J

Secured Parties

Org/Individual Date Added	Name	ار کا در
Organization 9/23/2021 4:30:00 PM	Rabo AgriFinance LLC	
	P.O. Box 411995	
	St. Louis, MO 63141	

This acknowledgement shows the information for the filing as entered into the Kentucky Secretary of State's index.

9/27/2021

ICC FINANCING STATEMENT ADDE	ENDUM				
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing because Individual Debtor name did not fit, check here	g Statement; if line 1b was left blank	7			
9a. ORGANIZATION'S NAME					
7M Cattle Feeders, Inc.					
9b. INDIVIDUAL'S SURNAME					
90. INDIVIDUAL'S SURNAME					
FIRST PERSONAL NAME					
ADDITIONAL NAME(SYINITIAL(S)	SUFFIX				
DEBTOR'S NAME: Provide (10a or 10b) only one additional	Debtor name or Debtor name that did not fit in			EIS FOR FILING OFFI	
do not omit, modify, or abbreviate any part of the Debtor's name)	and enter the mailing address in line 10c	mile 10 of 20 of the 1 fix	anding c	natement (Form OCC1) (us	e exact, ruii name
McClain Feed Yard, Inc.					
10b. INDIVIDUAL'S SURNAME	20 0.218	48			
INDIVIDUAL'S FIRST PERSONAL NAME					·····
INDIVIDUAL S FINST FENSUNAL, NAME					
INDIVIDUAL'S ADDITIONAL NAME(SYINITIAL(S)	and the second second	***************************************	······································	area a second a second	SUFFIX
Do. MAILING ADDRESS					
24 Mullins Lane	CITY		STATE	POSTAL CODE	COUNTRY
DADDITIONAL SECURED PARTY'S NAME OF	Benton ASSIGNOR SECURED PARTY'S N		KY	42025	USA
11a. ORGANIZATION'S NAME	TO TO THE TAKE TO THE TAKE TO THE	TAME. Floride only o	nam	e (Tradi Tib)	
11b, INDIVIDUAL'S SURNAME	LEIDOT DE DOOM, NAME			1717	
The morrison County Mile	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)INITIAL(S)	SUFFIX
c. MAILING ADDRESS	CITY	- W	STATE	POSTAL CODE	COUNTRY
ADDITIONAL SPACE FOR ITEM 4 (Collateral):					
This FINANCING STATEMENT is to be filed [for record] (or REAL ESTATE RECORDS (if applicable)					
Name and address of a RECORD OWNER of real estate descri (if Debtor does not have a record interest):	covers timber to be contibed in item 16 16. Description of real estate		tracted	collateral is filed as a	fixture filing
				The second secon	

Case 23-20084-rlj7 Doc 29-9 Filed 05/22/23 Entered 05/22/23 14:48:08 Desc Exhibit I UCC1 Financing Statements Page 15 of 34 ILIEN Cover Page

Date Printed: 05/21/2018

Debtor:

McClain Feed Yard, Inc. 824 Mullins Lane Benton, KY 42025

Obligation Number: 22114481

Primary Obligor: McClain Feed Yard, Inc

Collateral ID: Department:

Cost Center Name: East

Region: REF7:

Law Firm Bill Code:

iLien File #: 67968081

Order Confirmation #: 64213201

UserID: 265381

UserName: KATHY JOLY

Number of Collateral Pages Attached: 0

Transaction Type: Original

Jurisdiction: TX, Secretary of State

		-9 Filed 05/22/23 1 Financing Stateme				SC
Ш	CO FINIANCINO CTATEMENT					
	CC FINANCING STATEMENT LOW INSTRUCTIONS					
A. I	NAME & PHONE OF CONTACT AT FILER (optional) Phone: Fax:					
В. І	E-MAIL CONTACT AT FILER (optional)					
C. :	SEND ACKNOWLEDGMENT TO: (Name and Address)	77. DADO				
ľ		77 - RABO				
ľ	Rabo AgriFinance P.O. Box 411995	64213201				
	St. Louis, MO 63141	TXTX				
1 D	File with: Secretary of State, T. EBTOR'S NAME: Provide only one Debtor name (1a or 1b) (u				OR FILING OFFICE U	
	ame will not fit in line 1b, leave all of item 1 blank, check here	and provide the Individual Debtor inform				
	1a. ORGANIZATION'S NAME McClain Feed Yard, Inc.					
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
	4 Mullins Lane EBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) (u	Benton se exact. full name: do not omit. modifv.	or abbreviate any pa	KY art of the Debto	42025 r's name): if any part of the	USA Individual Debtor's
		and provide the Individual Debtor inform				
	2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. N	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
3 S	ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSI	GNOR SECURED PARTY): Provide onl	v one Secured Party	/ name (3a or 3	h)	
o. O	3a. ORGANIZATION'S NAME	ONON OLOGINED 17th (17). 1 Toylub om	y <u>0110</u> 000d10d 1 dity	Tidine (od or o	5)	
OR	Rabo AgriFinance LLC 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	30. INDIVIDUAL 3 SURIVAINE	FIRST PERSONAL NAME		ADDITIO	MAL NAME(S)/MITTAL(S)	SUFFIX
3c. l	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
	O. Box 411995	St. Louis		МО	63141	USA
	OLLATERAL: This financing statement covers the following collain Assets					
	neck <u>only</u> if applicable and check <u>only</u> one box: Collateral is heck only one box: Public-Finance Transaction Manufactured-Home Tr	eld in a Trust (see UCC1Ad, item 17 an	(6b. Check only	red by a Decedent's Perso if applicable and check <u>or</u> tural Lien \textsquare Non-UC	· .
7. Al	TERNATIVE DESIGNATION (if applicable): Lessee/Lesson		Seller/Buyer			ensee/Licensor
8. O	PTIONAL FILER REFERENCE DATA: 13201 22114481				cClain Feed Yard, Inc	

Case 23-20084-rlj7 Doc 29-9 Filed 05/22/23 Entered 05/22/23 14:48:08 Desc Exhibit I UCC1 Financing Statements Page 17 of 34

CC FINANCING STATEMENT LLOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141 E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com		×	18_0	A204E20	
NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141 E-MAIL CONTACT AT FILER (optional)	-		18_0	A201E20	,
NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141 E-MAIL CONTACT AT FILER (optional)			10-6	0291522	40
E-MAIL CONTACT AT FILER (optional)			08/17	/2018 05:00	D PM
CLS-CTLS_Glandale_Customer_Service(a)wollerskiuwer.col				FILED	
SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RAB	Mariana, and the control of the cont		SOS	IIIIIIII SECHETERY OF	STATE
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 C: K 69 TXT)	15954 7 K NS	(140006	
File with: Secretary of State, TX EBTOR'S NAME: Provide only one Debtor name (1s or 1b) (use exact, fur				OR FILING OFFICE U	
ame will not lik in line 16, leave all of item 1 blank, check here and provide					
Is organization's name McClain Feed Yard, Inc.					on si i s
10. INOMIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITION	VAL NAME(S)PHITIAL(S)	SUFFIX
MAILING ADDRESS	CITY				
weens weensag			STATE	POSTAL CODE	COUNTRY
4 Mullins Lane EBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exect, fu	Benton Il name: do not omit, moddy, or a the Individual Debtor informatio		KY	42025 's name); if any part of the	USA Individual Debtor
24 Mullins Lane IEBTOR'S NAME: Provide only one Debtor name (2e or 2b) (use exact, fur ame will not fit in line 2b, leave all of item 2 blank, check here and provide	il name: do not omit, modify, or a		KY nt of the Debtor or Financing Ste	42025 's name); if any part of the	USA Individual Debtor
24 Mullins Lane DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, fur ame will not fit in line 2b, leave all of item 2 blank, check here and provide 2a. ORGANIZATION'S NAME	finame; do not omit, mod≓y, or a ethe tndividual Debtor informatio		KY nt of the Debtor or Financing Ste	42025 's name): if any part of the tement Addendum (Form	USA Individual Debtor' UCC1Ad)
4 Mullins Lane EBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, further will not fit in line 2b, leave all of item 2 blank, check here and provide	finame: do not omit, mod:ly, or a e the Individual Debtor information FIRST PERSONAL NAME	n in item 10 of the	KY nt of the Debtor Financing Sta	42025 's name): if any part of the terrient Addendum (Form WE NAME(SYMPTIME(S) POSTAL CODE	USA Individual Debtor' UCC1Ad)
4 Mullins Lane EBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, furnowill not fit in line 2b, leave all of item 2 blank, check here and provide 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME	finame: do not omit, mod:ly, or a e the Individual Debtor information FIRST PERSONAL NAME	n in item 10 of the	KY nt of the Debtor Financing Sta	42025 's name): if any part of the terrient Addendum (Form WE NAME(SYMPTIME(S) POSTAL CODE	USA Individual Debtor' UCC1Ad)
4 Mullins Lane EBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, further will not fit in line 2b, leave all of item 2 blank, check here and provide 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME MAILING ADDRESS ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC 3a. ORGANIZATION'S NAME	finame: do not omit, mod:ly, or a e the Individual Debtor information FIRST PERSONAL NAME	n in item 10 of the	ACCITION STATE name (34 or 3)	42025 's name): if any part of the terrient Addendum (Form WE NAME(SYMPTIME(S) POSTAL CODE	USA Individual Debtor' UCC1Ad)
4 Mullins Lane EBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, further will not fit in line 2b, leave all of item 2 blank, check here and provide 2a. ORGANIZATION'S NAME 2b. UNDIVIDUAL'S SURNAME MAILING ADDRESS ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECTION, ORGANIZATION'S NAME (ASSIGNEE OF ASSIGNEE OF ASSIGNOR SECTION, ORGANIZATION'S NAME (ASSIGNEE OF ASSIGNEE OF ASSIGNEE OF ASSIGNOR SECTION, ORGANIZATION'S NAME (ASSIGNEE OF ASSIGNEE OF ASSIGNEE OF ASSIGNEE OF ASSIGNOR SECTION, ORGANIZATION'S NAME	finame: do not omit, mod:ly, or a the the individual Debter information FIRST PERSONAL NAME CITY CURED PARTY): Provide only or	n in item 10 of the	ADDITIO	42025 's name): if any part of the terminal Addendum (Form WAL NAME(SYMITTAL(S) POSTAL CODE	USA Individual Debtor UCC1Ad) SUFFIX COUNTRY

A Debtor is a Transmitting Utility

Seller/Buyer

Consignee/Consignor

Non-UCC Filing Licensee/Licensor

Agriculturel Lien

___Bailee/Bailor

McClain Feed Yard, Inc.

22114481

Manufactured-Home Transaction

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor

Public-Finance Transaction_

8. OPTIONAL FILER REFERENCE DATA:

66105954

EXHIBIT A

McClain MCA 2018 UCC-1 FINANCING STATEMENT FILING INFORMATION

- (a) all buildings, structures, improvements, fixtures, attachments, appliances, equipment, machinery and other articles now or hereafter erected on, affixed or attached to, or located in or on the real estate and any interest in the real estate located in Deaf Smith County, Texas, and described in EXHIBIT B (the "Land"), including all wells, watering and irrigation apparatus, pumps, motors, generators, pipes, center pivot irrigators and sprinklers, windmills, and fences (the "Improvements"):
- (b) all easements, rights-of-way and rights appurtenant to the Land or used in connection with the Land or as a means of access thereto ("<u>Easements</u>");
- the ground water on, under, pumped from or otherwise available to the Collateral or any drainage, retention, ditch, canal, reservoir, or other water rights, whether as a result of overlying groundwater rights, contractual rights, or otherwise and whether riparian, appropriative, or otherwise; the right to remove or extract any such ground water including any permits, rights or licenses granted by any nation or government, any state or other political subdivision thereof, any agency, authority, instrumentality, regulatory body, court, administrative tribunal, central bank or other entity exercising executive, legislative, judicial, taxing, regulatory or administrative powers or functions of or pertaining to government ("Governmental Authority") and any rights granted or created by any easement, covenant, agreement or contract with any Person; and any rights to which the Collateral or Debtor is entitled with respect to surface water, whether such rights are appropriative, riparian, prescriptive or otherwise and whether or not pursuant to historical use, contractual agreement, permit or other governmental authorization; any water right, water allocation for water not yet delivered, distribution right, delivery right, any proscriptive, contractual, easement or other rights necessary or convenient to convey any water to the Collateral, water storage right, or other water-related entitlement appurtenant to or otherwise applicable to the Collateral by virtue of the Collateral being situated within the boundaries of any governmental water district irrigation district or other local agency or within the boundaries of any private water company, mutual water company, or other non-governmental entity (collectively, "Water Rights");
 - (d) all other tenements, hereditaments and appurtenances to the Land;
- (e) minerals, oil, gas, coal, metallic ores, other minerals and any other hydrocarbon substances, minerals, mineral interests, royalties, overriding royalties, production payments, net profit interests and other interests and other interests and other interests and other and on the Land and other oil, gas, coal, metallic ores and any other mineral interests with which any of the foregoing interests or estates are pooled or unitized, including surface damage awards or settlements (the "Mineral Rights");
 - (f) timber now or hereafter standing or cut;
- (g) leases, subleases, licenses, occupancy agreements, concessions and other agreements, granting a possessory interest in and to, or the right to extract, mine, reside in, sell, or use the Collateral (collectively, the "Leases");
- (h) all utility contracts, maintenance agreements, management agreements, service contracts and other agreements directly related to the operation and maintenance of the Collateral;
 - (i) all bushes, groves, trees, plants, vines or other plantings, upon or under the Land ("Plantings");
- (j) working drawings, instructional manuals, and rights in processes directly related to the operation of the Collateral, and all other general intangibles described in EXHIBIT C;
- (k) other tangible personal property of every kind and description, whether stored on the Land or elsewhere, including all goods, materials, supplies, tools, books, records, chattels, furniture, machinery and equipment (except motor vehicles, trailers, and planting, tillage and harvesting equipment rolling stock) or which is in all cases (i) directly related to the operation of the Collateral or acquired in connection with any construction or maintenance of the Land or the Improvements, (ii) affixed or installed, or to be affixed or installed, in any manner on the Land or the Improvements, or (iii) described in EXHIBIT C:
 - (I) all permits and licenses relating or pertaining to the use or enjoyment of the Collateral;

- (m) proceeds of and any unearned premiums on any insurance policies covering the Collateral, including the right to receive and apply the proceeds of any insurance, judgments, or settlements made in lieu thereof, for damage to the Collateral (the "Insurance Claims"):
- (n) all awards made for the taking by condemnation or the power of eminent domain, or by any proceeding or purchase in lieu thereof, of the whole or any part of the Real Estate (the "Condemnation Awards");
- (o) money or other personal property of Debtor in addition to the foregoing deposited with or otherwise in Beneficiary's, Trustee's or Secured Parties possession;
- (p) rights and interests under any interest rate swap, interest rate caps, interest rate collars or other similar agreement between Debtor and a Swap Counterparty, for the purpose of fixing or limiting interest expense, or any foreign exchange, currency hedging, commodity hedging, security hedging or other agreement between Debtor and Secured Parties or any of their affiliates, for the purpose of limiting the market risk of holding currency, a security or a commodity in either the cash or futures markets, including all rights to the payment of money from Secured Parties or trustee under any deed of trust granted to Secured Parties (the "Trustee") Trustee under the Hedging Agreements; and all accounts, deposit accounts, and general intangibles, including payment intangibles, described in any of the Hedging Agreements;
- (q) the right, in the name and on behalf of Debtor, upon notice to Debtor, to appear in and defend any action or proceeding brought with respect to the Collateral and to commence any action or proceeding to protect the interest of Trustee, Beneficiary or Secured Parties in the Collateral; and
- (r) substitutions, replacements, additions, accessions and proceeds for or to any of the foregoing, and all books, records and files relating to any of the foregoing, including, without limitation, computer readable memory and data and any computer software or hardware reasonably necessary to access and process such memory and data.

EXHIBIT 8"

McClain MCA 2018
UCC-1 FINANCING STATEMENT FILING INFORMATION

Legal Description of Real Estate

Deaf Smith County, Texas

TRACT I:

A 36.03 acre tract, more or less, out of the Southwest part of Section 26, Block K-8, Abstract No. 1370, Certificate Number 128 of the T. T. R.R. Co. Surveys in Deaf Smith County, Texas, described by metes and bounds as follows:

BEGINNING at a number 60 common nail found for the Southwest corner of Section 26, Block K-8 whence a 1-1/2 inch iron pipe found for the Southeast corner of said section bears North 89 degrees 56 minutes 00 seconds East 5321.58 feet:

THENCE North 89 degrees 56 minutes 00 seconds East along the South line of said section, 48.80 feet to a 1/2 inch iron rod set in the East physical line of Farm Road 1057 for the Southwest and beginning corner of this tract; THENCE North 00 degrees 12 minutes 00 seconds West along the East physical line of Farm Road 1057, at 30.00 feet pass a 1/2 inch iron rod set for reference and at a total distance of 2587.27 feet a 1/2 inch iron rod set for corner; THENCE North 89 degrees 54 minutes 43 seconds East 606.84 feet to a 1/2 inch iron rod set in the East line of a tract

known as the West 40 acres of the Southwest 1/4 of said section whence a 1/2 inch iron rod set for the Northeast corner of the tract known as the West 40 acres of the Southwest 1/4 of said section bears North 00 degrees 11 minutes 29 seconds West 71.78 feet;

THENCE South 00 degrees 11 minutes 29 seconds East at 2557.50 feet pass a 1/2 inch iron rod set for reference and at a total distance of 2587.50 feet a 1/2 inch iron rod found in the South line of said section for the Southeast corner of the track known as the West 40 acres of the Southwest 1/4 of said section;

THENCE South 89 degrees 56 minutes 00 seconds West along the South line of said section, 606.45 feet to the place of beginning.

TRACT 2:

A 20.00 acre tract out of the Southwest part of Section 26, Block K-8, Certificate Number 128 of the T.T R.R. Co. Surveys in Deaf Smith County. Texas, described by metes and bounds as follows:

BEGINNING at a 1/2 inch iron rod with cap marked "RPLS 1848" found in the South line of Section 26 for the Southwest corner and POINT OF BEGINNING of this tract, whence a number 60 common nail found for the Southwest corner of Section 26, Block K-8 bears South 89 degrees 56 minutes 00 seconds West 655.25 feet; THENCE North 00 degrees 11 minutes 29 seconds West, a distance of 2587.50 feet a feuce corner post for the Northwest corner of this tract;

THENCE North 89 degrees 54 minutes 43 seconds East, a distance of 336.69 feet to a 1/2 inch iron rod with cap marked "HBD" set for the Northeast corner of this tract;

THENCE South 00 degrees 11 minutes 29 seconds East, at a distance of 2557.62 feet pass a 1/2 inch iron rod with cap marked "HBO" set for reference, continue for a total distance of 2587.62 feet a point on the South line of Section 26, whence a 1-1/2 inch iron pipe found for the Southeast corner of Section 26 bears North 89 degrees 56 minutes 00 seconds East, 4329.64 feet;

THENCE South 89 degrees 56 minutes 00 seconds West, along the South line of Section 26, a distance of 336.69 feet to the POINT OF BEGINNING.

EXHIBIT C

McClain MCA 2018
UCC-1 FINANCING STATEMENT FILING INFORMATION

Additional Collateral

associated with DEED OF TRUST by McClain Feed Yard on land located in Deaf Smith County, Texas
(list specific additional Collateral, if any)

All irrigation equipment; of whatever kind; now owned or hereafter acquired

	100	CINI			A 0:	T A T	EMENT
U	LL.		AN	L AIIN	\sim	1 A I I	

FOLLOW INSTRUCTIONS		Lien Solutions				
A. NAME & PHONE OF CONTACT AT FILER (op Phone: Fax:	otional)	Representation of filing				
B. E-MAIL CONTACT AT FILER (optional)		This filing is Completed File Number : 190029038537 File Date : 31-Jul-2019				
C. SEND ACKNOWLEDGMENT TO: (Name and	Address) 8477 - RABO	File Date : 31-	-Jui-2019			
Rabo AgriFinance P.O. Box 411995 St. Louis, MO 63141	71038435 TXTX					
File with: Secretary	y of State. TX	THE ABOVE SPACE IS F	OR FILING OFFICE U	SE ONLY		
DEBTOR'S NAME: Provide only one Debtor nan name will not fit in line 1b, leave all of item 1 blank, ch 1a. ORGANIZATION'S NAME 7M Cattle Feeders, Inc.		nformation in item 10 of the Financing St				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL N	ADDITION ADDITION	DNAL NAME(S)/INITIAL(S)	SUFFIX		
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
824 Mullins Lane	Benton	KY	42055	USA		
DEBTOR'S NAME: Provide only one Debtor nan name will not fit in line 2b, leave all of item 2 blank, ch 2a. ORGANIZATION'S NAME	· <u></u>	odify, or abbreviate any part of the Debto nformation in item 10 of the Financing St	**			
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL N	AME ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY		
3. SECURED PARTY'S NAME (or NAME of ASSI 38. ORGANIZATION'S NAME Rabo AgriFinance LLC	GNEE of ASSIGNOR SECURED PARTY): Provid	le only <u>one</u> Secured Party name (3a or 3	1 (3b)	•		
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL N	NAME ADDITION	ONAL NAME(S)/INITIAL(S)	SUFFIX		

CITY

St. Louis

T. OOLLY (TETO IL.	inio inanong statement	. OU VOID THE TOHOWING	g conatoral.
ΔΙΙ Δεερίε			

3c. MAILING ADDRESS

P.O. Box 411995

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	being administered by a Decedent's Personal Representative
6a. Check only if applicable and check only one box:	6b. Check only if applicable and check only one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer	Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: 71038435 22117434	7M Cattle Feeders, Inc.

POSTAL CODE

63141

STATE

MO

COUNTRY

USA

	J	, 0			
		,	10 0	22222	· .
JCC FINANCING STATEMENT			יש–פו	02928766	14
OLLOW INSTRUCTIONS .	_	G	18/01/	2019 05:00	PM
A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141		.		FILED	
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com			iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	TEXAS SECRETARY OF S	TATE
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO				ON THE INTERIOR PRODUCTION OF THE INTERIOR	I TANADA INTO
Lien Solutions P.O. Box 29071 71038	$\overline{}$	1-	041725		
Glendale, CA 91209-9071		.\/\ \	5 041 723		, j
-		N_{α}			
File with: Secretary of State, TX				OR FILING OFFICE U	
 DEBTOR'S NAME: Provide only one Debtor name (1e or 1e) (use exact, full rename will not fit in fine 1e, leave all of item 1 blank, check here. 					
18. ORGANIZATION'S NAME					
7M Cattle Feeders, Inc.					
DR 16, INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	NAL NAME(SYINITIAL(S)	SUFFIX
IC MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
824 Muliins Lane	<u>Benton</u>		KY	42055	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full of					
name will not fit in line 2b, leave all of Item 2 blank, check here and provide the Ca. ORGANIZATIONS NAME	ne individual Debic	of the 10 of the	Financing St	atement Addendum (Form	UCC1Ad)
McClain Feed Yard, Inc.					
25. INDIVIDUAL'S SURNAME	FIRST PERSONAL	LNAME	ADDITIO	NAL NAME(SYNITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
824 Mullins Lane	Benton		KY	42055	USA
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECU	RED PARTY): Pro	vide only one Secured Party	name (3a or 3	b)	
3a. ORGANIZATION'S NAME Rabo AgriFinance LLC					
OR 35. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	MILICOR	ONAL NAME(SYDITIAL(S)	SUFFIX
] .
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
P.O. Box 411995	St. Louis		МО	63141	USA
4. COLLATERAL: This financing statement covers the following collateral: See attached Exhibit "A", "B", and "C"					

5. Check only if applicable	and check only one box; Collateral is h	neld in a Trust (see UCC1Ad, Item 1	7 and Instructions)	being administered by a De	cedent's Personal Representative
6a. Check only if applicable	le and check only one box:			6b. Check only if applicable	e and check <u>only</u> one box:
Public-Finance Tr	ansaction Manufactured-Home Tr	ransaction A Debtor is a Tr	ansmitting Utility	Agricultural Lien	Non-UCC Filling
7. ALTERNATIVE DESIGN	NATION (if applicable): Lessee/Lesso	Consignee/Consignor	Seller/Buyer	Baileo/Bailor	Licensec/Licensor
8. OPTIONAL FILER REF	ERENCE DATA:				
71038284	22117434			7M Cattle F	eeders, Inc.

EXHIBIT A

McClain MCA 2018 UCC-1 FINANCING STATEMENT FILING INFORMATION

- (a) all buildings, structures, improvements, fixtures, attachments, appliances, equipment, machinery and other articles now or hereafter erected on, affixed or attached to, or located in or on the real estate and any interest in the real estate located in Deaf Smith and Parmer Counties, Texas, and described in EXHIBIT B-2 (the "Land"), including all wells, watering and irrigation apparatus, pumps, motors, generators, pipes, center pivot irrigators and sprinklers, windmills, and fences (the "Improvements");
- (b) all easements, rights-of-way and rights appurtenant to the Land or used in connection with the Land or as a means of access thereto ("Easements");
- the ground water on, under, pumped from or otherwise available to the Collateral or any drainage, retention, ditch, canal, reservoir, or other water rights, whether as a result of overlying groundwater rights, contractual rights, or otherwise and whether riparian, appropriative, or otherwise; the right to remove or extract any such ground water including any permits, rights or licenses granted by any nation or government, any state or other political subdivision thereof, any agency, authority, instrumentality, regulatory body, court, administrative tribunal, central bank or other entity exercising executive, legislative, judicial, taxing, regulatory or administrative powers or functions of or pertaining to government ("Governmental Authority") and any rights granted or created by any easement, covenant, agreement or contract with any Person; and any rights to which the Collateral or Debtor is entitled with respect to surface water, whether such rights are appropriative, riparian, prescriptive or otherwise and whether or not pursuant to historical use, contractual agreement, permit or other governmental authorization; any water right, water allocation for water not yet delivered, distribution right, delivery right, any proscriptive, contractual, easement or other rights necessary or convenient to convey any water to the Collateral, water storage right, or other water-related entitlement appurtenant to or otherwise applicable to the Collateral by virtue of the Collateral being situated within the boundaries of any governmental water district irrigation district or other local agency or within the boundaries of any private water company, mutual water company, or other non-governmental entity (collectively, "Water Rights")
 - (d) all other tenements, hereditaments and appurtenances to the Land:
- (e) minerals, oil, gas, coal, metallic ores, other minerals and any other hydrocarbon substances, minerals, mineral interests, royalties, overriding royalties, production payments, net profit interests and other interests and other interests and estates in, under and on the Land and other oil, gas, coal, metallic ores and any other mineral interests with which any of the foregoing interests or estates are pooled or unitized, including surface damage awards or settlements (the "Mineral Rights");
 - timber now or hereafter standing or cut;
- (g) leases, subleases, licenses, occupancy agreements, concessions and other agreements, granting a possessory interest in and to, or the right to extract, mine, reside in, sell, or use the Collateral (collectively, the "Leases");
- (h) all utility contracts, maintenance agreements, management agreements, service contracts and other agreements directly related to the operation and maintenance of the Collateral;
 - ii) all bushes, groves, trees, plants, vines or other plantings, upon or under the Land ("Plantings");
- (i) working drawings, instructional manuals, and rights in processes directly related to the operation of the Collateral, and all other general intangibles described in EXHIBIT C;
- (k) other tangible personal property of every kind and description, whether stored on the Land or elsewhere, including all goods, materials, supplies, tools, books, records, chattels, furniture, machinery and equipment (except motor vehicles, trailers, and planting, tillage and harvesting equipment rolling stock) or which is in all cases (i) directly related to the operation of the Collateral or acquired in connection with any construction or maintenance of the Land or the Improvements, (ii) affixed or installed, or to be affixed or installed, in any manner on the Land or the Improvements, or (iii) described in EXHIBIT_C;

McClain MCA 2018 UCC-1 Financing Statement Information

- (l) all permits and licenses relating or pertaining to the use or enjoyment of the Collateral;
- (m) proceeds of and any uneamed premiums on any insurance policies covering the Collateral, including the right to receive and apply the proceeds of any insurance, judgments, or settlements made in lieu thereof, for damage to the Collateral (the "Insurance Claims");
- (n) all awards made for the taking by condemnation or the power of eminent domain, or by any proceeding or purchase in lieu thereof, of the whole or any part of the Real Estate (the "Condemnation Awards");
- (o) money or other personal property of Debtor in addition to the foregoing deposited with or otherwise in Beneficiary's, Trustee's or Secured Parties possession;
- (p) rights and interests under any interest rate swap, interest rate caps, interest rate collars or other similar agreement between Debtor and a Swap Counterparty, for the purpose of fixing or limiting interest expense, or any foreign exchange, currency hedging, commodity hedging, security hedging or other agreement between Debtor and Secured Parties or any of their affiliates, for the purpose of limiting the market risk of holding currency, a security or a commodity in either the cash or futures markets, including all rights to the payment of money from Secured Parties or trustee under any deed of trust granted to Secured Parties (the "Trustee") Trustee under the Hedging Agreements; and all accounts, deposit accounts, and general intangibles, including payment intangibles, described in any of the Hedging Agreements;
- (q) the right, in the name and on behalf of Debtor, upon notice to Debtor, to appear in and defend any action or proceeding brought with respect to the Collateral and to commence any action or proceeding to protect the interest of Trustee, Beneficiary or Secured Parties in the Collateral; and
- (r) substitutions, replacements, additions, accessions and proceeds for or to any of the foregoing, and all books, records and files relating to any of the foregoing, including, without limitation, computer readable memory and data and any computer software or hardware reasonably necessary to access and process such memory and data.

EXHIBIT B-1"

McClain MCA 2018
UCC-1 FINANCING STATEMENT FILING INFORMATION

Legal Description of Real Estate

Deaf Smith County, Texas

Tract 2:

A 36.03 acre tract, more or less, out of the Southwest part of Section 26, Block K-8, Abstract No. 1370. Certificate Number 128 of the T. T. R. R. Co. Surveys in Deaf Smith County, Texas, described by metes and bounds as follows:

BEGINNING at a number 60 common nail found for the Southwest corner of Section 26, Block K-8 whence a 1-1/2 inch iron pipe found for the Southeast corner of said section bears North 89 degrees 58 minutes 00 seconds East 5321,58 feet;

THENCE North 89 degrees 56 minutes 00 seconds East along the South line of said section, 48.80 feet to a 1/2 inch iron rod set in the East physical line of Farm Road 1057 for the Southwest and beginning corner of this tract.

THENCE North 00 degrees 12 minutes 00 seconds West along the East physical line of Farm Road 1057, at 30.00 feet pass a 1/2 inch iron rod set for reference and at a total distance of 2587.27 feet a 1/2 inch iron rod set for corner;

THENCE North 89 degrees 54 minutes 43 seconds East 606.84 feet to a 1/2 inch Iron rod set in the East line of a tract known as the West 40 acres of the Southwest 1/4 of said section whence a 1/2 inch Iron rod set for the Northeast corner of the tract known as the West 40 acres of the Southwest 1/4 of said section bears North 00 degrees 11 minutes 29 seconds West 71.78 feet;

THENCE South 00 degrees 11 minutes 29 seconds East at 2557.50 feet pass a 1/2 inch iron rod set for reference and at a total distance of 2587.50 feet a 1/2 inch iron rod found in the South line of sald section for the Southeast corner of the track known as the West 40 acres of the Southwest 1/4 of said section;

THENCE South 89 degrees 56 minutes 00 seconds West along the South line of said section, 608.45 feet to the place of beginning.

Tract 3:

A 20.00 acre tract out of the Southwest part of Section 26, Block K-8, Certificate Number 128 of the T.T. R.R. Co. Surveys in Deaf Smith County, Texas, described by metes and bounds as follows:

BEGINNING at a 1/2 inch fron rod with cap marked "RPLS 1848" found in the South line of Section 28 for the Southwest corner and POINT OF BEGINNING of this tract, whence a number 60 common nail found for the Southwest corner of Section 26, Block K-8 bears South 89 degrees 56 minutes 00 seconds West 655,25 feet;

THENCE North 00 degrees 11 minutes 29 seconds West, a distance of 2587.50 feet a fence corner post for the Northwest corner of this tract;

THENCE North 89 degrees 54 minutes 43 seconds East, a distance of 336.69 feet to a 1/2 inch iron rod with cap marked "HBD" set for the Northeast corner of this tract;

THENCE South 00 degrees 11 minutes 29 seconds East, at a distance of 2557.62 feet pass a 1/2 inch iron rod with cap marked "HBO" set for reference, continue for a total distance of 2587.62 feet a point on the South line of Section 26, whence a 1-1/2 inch iron pipe found for the Southeast corner of Section 26 bears North 89 degrees 56 minutes 00 seconds East, 4329.84 feet;

THENCE South 89 degrees 56 minutes 00 seconds West, along the South line of Section 26, a distance of 336.69 feet to the POINT OF BEGINNING.

EXHIBIT B-2"

McClain MCA 2018
UCC-1 FINANCING STATEMENT FILING INFORMATION

Legal Description of Real Estate

Parmer County, Texas

Tract 1:

A tract of land being all of Section 25 and a portion of Section 24 of Charles E. Harding's Subdivision of Capitol League 473 and parts of Capitol Leagues 459, 460, 461, 472 and 474 in Parmer County, Texas, as shown by the map or plat thereof of record in Volume 6, Page 164, Deed Records of Parmer County, Texas, and being described by metes and bounds as follows:

BEGINNING at a 1/2 inch iron rod with camp stamped "Furman RPLS 1959" set for the southwest corner of said Section 25, being the common corner of Sections 25-36-35-26 from whence a 1/2 inch iron rod found for the common corner of sections 27-34-33-28, all in said subdivision bears North 89° 56' 32" west, 10.584.82 feet, the southwest corner of Section 36 and the southeast corner of Section 35 bears South

00° 11' 46" West, 5,281.81 feet, from this point a harrow tooth found as called for in that certain instrument recorded in Volume 225, Page 730, of the Deed Records of Parmer County, Texas, for the Northwest comer of Section 1, Block C of Capitol Syndicate Subdivision in Parmer County, Texas, as shown by Plat thereof of record in Volume 2, Page 495 of said Deed Records bears West (Bearing Basis) 1,411.64 feet;

THENCE North 00° 11' 48" East along the common line of Sections 25 and 26, and the common line of Section 24 and 23, of said Charles E. Harding's Subdivision, and along the center of a road, at 5,281.61 feet pass the common line of Sections 25-26-23-24 a total distance of 8,503.54 feet to a 3/4 inch iron pipe found as called for in that certain instrument recorded in Volume 156, Page 603 of said Deed Records, and in Volume 2, Page 219 of the Field Note Records of Parmer County, Texas, from whence the common corner of Sections 24-23-14-13 of said Charles E. Harding's Subdivision bears North 00° 11' 48" East 5,281.61 feet and 1 1/4 inch iron pipe with 5/8 inch rod adjacent found for the common corner of Sections 12-13-14-11 of said Charles E. Harding's Subdivision, as called for in that certain instrument recorded in Volume 2, Page 343, of said Field Note records bears North 00° 11' 46" East 7,341.28 feet;

THENCE South 89° 40° 58" East 2,100.84 feet along a fence line and along the North line of this tract of land and the North line of that certain tract of land described in said Volume 158, Page 803 and said Volume 2, Page 219 to a 3/4 inch iron pipe found as called for in said Volume 156, Page 803 and said Volume 2, Page 219, said North line being monumented and generally accepted on the ground for over 25 years, from whence the Northeast comer of Section 24 and the Southeast corner of Section 14 of said Charles E. Harding's Subdivision bears North 00° 11' 07" East 7,345.07 feet;

THENCE South 00° 11' 07" West at 3,187.40 feet pass a 3/4 Inch Iron pipe found, this iron pipe is a monument of record in said Volume 156, Page 603 and said Volume 2, Page 219 for the Southeast corner of Section 24 of said Charles E. Harding's Subdivision, it is however the Professional opinion of this surveyor that this corner lies in the East line of this survey but 26.81 feet North of the actual section corner, at 3,214.21 feet pass what is in my Professional opinion the Southeast corner of Section 24 and the Northeast corner of Section 25 of said Charles E. Harding's Subdivision at 3,301,75 feet pass a 1 1/2 inch fron pipe found as called for in said Volume 156, Page 603 and said Volume 2, Page 219 for the Southwest comer of Section 22 and the Northwest corner of Section 27 in Township 1 North, Range 3 East of a Capitol Syndicate Subdivision as shown by Plat thereof of record in Volume 5, Page 394 of said Deed Records, a total distance of 8,493.86 feet to a point being the Southeast corner of Section 25 and the Northeast corner of Section 36 of said Charles E. Harding's Subdivision from whence the Southeast corner of said Section 36 bears South 00° 11' 07" West 5,279.65 feet from this point a railroad spike found as called for in that certain instrument recorded in Volume 225, Page 730 of the Deed Records of Parmer County, Texas, for the Northwest corner of Section 1, Block C of Capitol Syndicate Subdivision in Parmer County, Texas as shown by Plat thereof record in Volume 2, Page 495 of said Deed Records bears East (Bearing Basis) 1,324.17 feet;

THENCE North 89° 56' 48" West 2,102.46 feet along the South line of Section 25 and the North line of Section 36 of said Charles E. Harding's Subdivision to the POINT OF BEGINNING and containing 410.0 acres of land, more or less.

EXHIBIT C

McClain MCA 2018
UCC-1 FINANCING STATEMENT FILING INFORMATION

Additional Collateral

associated with DEED OF TRUST by McClain Feed Yard and 7M Cattle Feeders, Inc. on land located in Deaf Smith and Parmer Counties, Texas

(list specific additional Collateral, if any)

Fixtures |

Buildings, fixtures, and equipment associated with agricultural production or the productions of farm products, including but not limited to:

Attached Equipment	
2 x Stationary Roto-Mixers	
6 x Liquid Storage Tanks	
9 x Hyd, Working Chutes (Snakes Not Included)	
1 x 12 x 70 Truck Scale	
2 x 12 x 70 Cattle Scales With Fencing and Gates	
I x Grain Probe	

All Water Rights related to but not limited to:

Subject Water Wells - 410.0 Acre Feedyard Tract									
Section	triuriet Number	Pempis Number	Permit Smits	Incanera	Hereidy Total	Curren GPM Liditale			
24	79067	390 3	Charreta	Yes	No	នា			
57	79677	3974	Current	Yes	Yes	(4			
24	79650	3977	Current	Yes	Yas	53			
24	79681	3978	Destroyed Current	Yes	Yo	0			
23	X377. 0	201 24	Стотеля	Nime	No	0			
25	79163	3423	Current	Yes	Yes	40			
23	79072	31 śņ	Abandoned	Yes	٥٠'٥	0			
25	79544	3831	Current	Yes	No	÷0			
25	75540	2689	Current	Yes Mill and Office	No	30			
25	79189	1434	Current	Yes	No	=0			
24	79719	4021	Сштев	Yes	No	40			
2,5	83148	50106	Cratter	Nine	Nn	0			
Tetal						357			
Total Tested						157			

Case 23-20084-rlj7 Doc 29-9 Filed 05/22/23 Entered 05/22/23 14:48:08 Desc Exhibit I UCC1 Financing Statements Page 32 of 34 ILIEN Cover Page

Date Printed: 09/22/2021

Debtor:

7M Cattle Feeders, Inc. 824 Mullins Lane Benton, KY 42025

Obligation Number: 0000030682

Primary Obligor: McClain Feed Yard, Inc.

Collateral ID:

Department: closing

Cost Center Name: east/northeast

Region: REF7:

Law Firm Bill Code:

iLien File #: 80307204

Order Confirmation #: 82554657

UserID: 276553

UserName: DAN TRAPP

Number of Collateral Pages Attached: 0

Transaction Type: Original

Jurisdiction: TX, Secretary of State

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS A NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL. CONTACT AT FILER (optional) uccfillingreturn@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Lien Solutions P.O. Box 29071 TXTX Glendale, CA 91209-9071 File with: Secretary of State, TX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name: do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) Ta. ORGANAZIONS NAME: To. MALING ADDRESS CITY STATE POSTAL CODE COUNTR' 16. INDIVIDUAL'S SURNAME To. MALING ADDRESS CITY STATE POSTAL CODE COUNTR' 17. ADDITIONAL NAME(SyINITIAL(S) USA 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name: do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To. MALING ADDRESS CITY STATE POSTAL CODE COUNTR' USA 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name: do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To. COR ORGANIZATIONS NAME MCClain Farms, Inc. OR Tall The ABOVE SPACE IS FOR FILING OFFICE USE ONLY TATE THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE	UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (optional) Localingretum@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 TXTX Glendale, CA 91209-9071 TXTX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1s or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) Ta. ORGANIZATIONS NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) Local Mullins Lane Benton RY Addulins Lane ADDITIONAL NAME(S)/INITIAL(S) SUFFIX ADDITIONAL NAME(S)/INITIAL(S) SUFFI		Case 23-20084-rli7 Doc 29- it LUCC:		d 05/22/23 E cing Statemen				esc
A NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lieu Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 TXTX 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deator information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To GRANIZATIONS NAME: To MALINA ADDRESS 1. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deator information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To GRANIZATIONS NAME: To MALINA ADDRESS 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deator information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To MALINA ADDRESS 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deator information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To CRANIZATIONS NAME To STATE POSTAL CODE OUNTRY To STATE POSTAL CO	A NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters (kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (optional) ucdrilingretum@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) B. E-MAIL CONTACT AT FILER (optional) ucdrilingretum@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) P.O. Box 29071 TXTX Glendale, CA 91209-9071 TXTX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only ggg Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b, leve all of filem 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCCTAd) Tax ORGANIZATIONS NAME TAX Cattle Feeders, Inc. B. HAND ADDRESS CITY STATE POSTAL CODE COUNTRY 22. DEBTOR'S NAME: Provide only ggg Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 2b, leave all of fitem 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 22. ORGANIZATIONS NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 23. MONIFOLAL S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 24. Mullins Lane Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY): Provide only ggg Secured Party name (3a or 3b) 33. ORGANIZATIONS NAME Rabo Agriffinance LLC The Interpretation of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) Tax Name of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 25. ROMANIZATIONS NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 26. MALING ADDRESS CITY STATE POSTAL CODE COLNTRY SUFFIX SUFFIX SUFFIX SUFFIX S				oning Octationinon	is lage of	0.0	•	
A NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lieu Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 TXTX 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deator information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To GRANIZATIONS NAME: To MALINA ADDRESS 1. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deator information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To GRANIZATIONS NAME: To MALINA ADDRESS 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deator information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To MALINA ADDRESS 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deator information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To CRANIZATIONS NAME To STATE POSTAL CODE OUNTRY To STATE POSTAL CO	A NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters (kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (optional) ucdrilingretum@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) B. E-MAIL CONTACT AT FILER (optional) ucdrilingretum@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) P.O. Box 29071 TXTX Glendale, CA 91209-9071 TXTX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only ggg Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b, leve all of filem 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCCTAd) Tax ORGANIZATIONS NAME TAX Cattle Feeders, Inc. B. HAND ADDRESS CITY STATE POSTAL CODE COUNTRY 22. DEBTOR'S NAME: Provide only ggg Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 2b, leave all of fitem 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 22. ORGANIZATIONS NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 23. MONIFOLAL S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 24. Mullins Lane Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY): Provide only ggg Secured Party name (3a or 3b) 33. ORGANIZATIONS NAME Rabo Agriffinance LLC The Interpretation of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) Tax Name of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 25. ROMANIZATIONS NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 26. MALING ADDRESS CITY STATE POSTAL CODE COLNTRY SUFFIX SUFFIX SUFFIX SUFFIX S								
A NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lieu Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 TXTX 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deator information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To GRANIZATIONS NAME: To MALINA ADDRESS 1. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deator information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To GRANIZATIONS NAME: To MALINA ADDRESS 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deator information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To MALINA ADDRESS 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deator information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To CRANIZATIONS NAME To STATE POSTAL CODE OUNTRY To STATE POSTAL CO	A NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters (kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (optional) ucdrilingretum@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) B. E-MAIL CONTACT AT FILER (optional) ucdrilingretum@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) P.O. Box 29071 TXTX Glendale, CA 91209-9071 TXTX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only ggg Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b, leve all of filem 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCCTAd) Tax ORGANIZATIONS NAME TAX Cattle Feeders, Inc. B. HAND ADDRESS CITY STATE POSTAL CODE COUNTRY 22. DEBTOR'S NAME: Provide only ggg Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 2b, leave all of fitem 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 22. ORGANIZATIONS NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 23. MONIFOLAL S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 24. Mullins Lane Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY): Provide only ggg Secured Party name (3a or 3b) 33. ORGANIZATIONS NAME Rabo Agriffinance LLC The Interpretation of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) Tax Name of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 25. ROMANIZATIONS NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 26. MALING ADDRESS CITY STATE POSTAL CODE COLNTRY SUFFIX SUFFIX SUFFIX SUFFIX S								
A NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Line Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (optional)	A NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters (kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (optional) ucdrilingretum@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) B. E-MAIL CONTACT AT FILER (optional) ucdrilingretum@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) P.O. Box 29071 TXTX Glendale, CA 91209-9071 TXTX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only ggg Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b, leve all of filem 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCCTAd) Tax ORGANIZATIONS NAME TAX Cattle Feeders, Inc. B. HAND ADDRESS CITY STATE POSTAL CODE COUNTRY 22. DEBTOR'S NAME: Provide only ggg Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 2b, leave all of fitem 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 22. ORGANIZATIONS NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 23. MONIFOLAL S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 24. Mullins Lane Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY): Provide only ggg Secured Party name (3a or 3b) 33. ORGANIZATIONS NAME Rabo Agriffinance LLC The Interpretation of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) Tax Name of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 25. ROMANIZATIONS NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 26. MALING ADDRESS CITY STATE POSTAL CODE COLNTRY SUFFIX SUFFIX SUFFIX SUFFIX S								
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (optional) uccflingreturn@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Lien Solutions 82554657 P.O. Box 29071 TXTX Glendale, CA 91209-9071 TXTX 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) Ta. DREANZATIONS NAME TOTAL CODE COUNTR'	A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (optional) uccfilingretum@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Lien Solutions 82554657 P.O. Box 29071 TXTX Glendale, CA 91209-9071 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provise only gag Debtor name (1s or 1b) (use exact, full name; do not ornit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) TARGET THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provise only gag Debtor name (1s or 1b) (use exact, full name; do not ornit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To RORANIZATION'S NAME To MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY ADDRIFTANIAN NAME MCClain Farms, Inc. DEBTOR'S NAME: Provide only gag Debtor name (2s or 2b) (use exact, full name; do not ornit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in fine 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2. DEBTOR'S NAME: Provide only gag Debtor name (2s or 2b) (use exact, full name; do not ornit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in fine 2b, serve all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2. DEBTOR'S NAME: Provide only gag Debtor name (2a or 2b) (use exact, full name; do not ornit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in fine 2b, serve all of item 2 blank, check here and provide t	UC	CC FINANCING STATEMENT						
Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (optional) uccfillingreturn@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Lien Solutions 82554657 P.O. Box 29071 Glendale, CA 91209-9071 TXTX 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deanem will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad) To GRGANIZATION'S NAME 7 M Cattle Feeders, Inc. OR 1b. INDIVIDUAL'S SURNAME 1c. MAILING ADDRESS 2d. Mullins Lane 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Deanem will not it in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad) 1c. MAILING ADDRESS 2d. Mullins Lane DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name; if any part of the Individual Deanem will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME MCClain Farms, Inc. OR 2b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTR'	Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 B. E-MAIL CONTACT AT FILER (piglional) ucofflingreturin@wolterskluwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Septimized Residual	FOI	LOW INSTRUCTIONS						
uccfilingretum@wolterskiuwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Lien Solutions 82554657 P.O. Box 29071 TXTX Significant of the provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME TM Cattle Feeders, Inc. OR 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME Benton CITY STATE POSTAL CODE COUNTR' ADDITIONAL NAME(S)INITIAL(S) SUFFIX UCC1Ad) 2a. ORGANIZATION'S NAME MCClain Farms, Inc. OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX WCClain Farms, Inc. OR 2c. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTR' ADDITIONAL NAME(S)INITIAL(S) SUFFIX WCClain Farms, Inc. OR 2c. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX MCClain Farms, Inc. OR 2c. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTR' STATE POSTAL CODE COUNTR	uccfilingreturn@wolterskiuwer.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Lien Solutions 82554657 P.O. Box 29071 Glendale, CA 91209-9071 TXTX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1 a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debto name with lot fit in tine 1b, leave all of item 1b lank, check here and provide the Individual Debto information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME: 7M Cattle Feeders, Inc. 1c. MALLING ADDRESS CITY STATE POSTAL CODE COUNTRY 22 DEBTOR'S NAME: Provide only ong Debtor name (2 a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name; if any part of the Individual Debto name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME MCClain Farms, Inc. OR 2b. MONTOULL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX CITY STATE POSTAL CODE COUNTRY Benton CITY STATE POSTAL CODE COUNTRY SORGANIZATION'S NAME MCClain Farms, Inc. OR 3b. ROGANIZATION'S NAME RADO AGRIFINANCE COUNTRY SCALLATERY STATE POSTAL CODE COUNTRY 42025 USA SECURED PARTY'S NAME RADO AGRIFINANCE RADO AGRIFI			3282 Fax: 81	18-662-4141				
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 82554657 P.O. Box 29071 Glendale, CA 91209-9071 TXTX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only gong Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1c. MAILING ADDRESS	C. SEND ACKNOWLEDGMENT TO: (Name and Address) 8477 - RABO Lien Solutions 82554657 P.O. Box 29071 TXTX Glendale, CA 91209-9071 File with: Secretary of State, TX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S NAME: Provide only one Debtor name (1s or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad) Ta. ORGANIZATIONS NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX To. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY	B.	* * * * *						
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 TXTX 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME TM Cattle Feeders, Inc. OR 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME POSTAL CODE COUNTR 824 Mullins Lane 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) Tax ORGANIZATION'S NAME MCClain Farms, Inc. OR 2a. MUllins Lane FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(s)INITIAL(S) SUFFIX TY ADDITIONAL NAME(s)INITIAL(S) SUFFIX ADDITIONAL NAME(s)INITIAL(S) SUFFIX TY STATE POSTAL CODE COUNTR ADDITIONAL NAME(s)INITIAL(S) SUFFIX ADDITIONAL NAME(s)INITIAL(S) SUFFIX TY STATE POSTAL CODE COUNTR ADDITIONAL NAME(s)INITIAL(S) SUFFIX SUBJECT ADDITIONAL NAME(s)INITIAL(S) SUBJECT ADDITIONAL NAME subject	Lien Solutions 82554657 P.O. Box 29071 Glendale, CA 91209-9071 TXTX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only gne Debtor name (1a or 1b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. DREAMIZATIONS NAME: TM Cattle Feeders, Inc. R. MALING ADDRESS CITY STATE POSTAL CODE COUNTRY 22. DEBTOR'S NAME: Provide only gne Debtor name (2a or 2b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. DREAMIZATIONS NAME MCClain Farms, Inc. R. MALING ADDRESS CITY STATE POSTAL CODE COUNTRY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only gne Secured Party name (3a or 3b) 3a. ORGANIZATIONS NAME Rabo AgriFinance LLC R. SILNOYDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SyINITIAL(S) SUFFIX 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SyINITIAL(S) SUFFIX 3c. MALING ADDRESS CITY STATE POSTAL CODE COUNTRY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only gne Secured Party name (3a or 3b) Sa. ORGANIZATIONS NAME Rabo AgriFinance LLC R. SILDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SyINITIAL(S) SUFFIX Sc. Louis MO 63141 USA 4. COLLATERAL: This financing statement covers the following collateral:	Ļ							
P.O. Box 29071 Glendale, CA 91209-9071 TXTX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Dename will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME TM Cattle Feeders, Inc. OR 1b. INDIVIDUAL'S SURNAME 1c. MAILING ADDRESS 2c. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX CITY STATE POSTAL CODE COUNTR' 42025 USA 3c. ORGANIZATION'S NAME McClain Farms, Inc. OR 3c. NORANIZATION'S NAME MCClain Farms, Inc. OR 3c. MAILING ADDRESS Benton CITY STATE POSTAL CODE COUNTR' 42025 USA 3c. ORGANIZATION'S NAME MCClain Farms, Inc. OR 3c. NORANIZATION'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3c. ORGANIZATION'S NAME Rabo AgriFinance LLC	P.O. Box 29071 Glendale, CA 91209-9071 File with: Secretary of State, TX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) Ta. ORGANIZATION'S NAME: 7M Cattle Feeders, Inc. OR 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME POSTAL CODE COUNTRY 22. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor and well not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME: MCClain Farms, Inc. OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY ADDITIONAL NAME(S)INITIAL(S) SUFFIX SORGANIZATION'S NAME Rabo AgriFinance LLC Toty State ADDITIONAL NAME(S)INITIAL(S) SUFFIX SURPLY STATE POSTAL CODE COUNTRY SURNAME SURNAM	C.	SEND ACKNOWLEDGMENT TO: (Name and Address) 847	77 - RABO					
Glendale, CA 91209-9071 File with: Secretary of State, TX	Glendale, CA 91209-9071 File with: Secretary of State, TX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b. leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME 7M Cattle Feeders, Inc. OR 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 42025 USA 2D. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debto name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME MCClain Farms, Inc. OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC OR 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX SUFFIX SAME POSTAL CODE COUNTRY 42025 USA 3b. COUNTRY 42025 COUNTRY 5b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX COUNTRY 5b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX SAME POSTAL CODE COUNTRY 42025 COUNTRY 42025 COUNTRY 5b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX COUNTRY 5c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 42025 COUNTRY 42025 COUNTRY 42025 COUNTRY 42025 COUNTRY 4	[657				
File with: Secretary of State, TX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Dename will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME 7/M Cattle Feeders, Inc. 1b. INDIVIDUAL'S SURNAME 1c. MAILING ADDRESS 1c. MAILING ADDRESS 1c. MILING ADDRESS 2c. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Dename will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 3c. ORGANIZATION'S NAME Benton STATE POSTAL CODE COUNTR' ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 3c. ORGANIZATION'S NAME McClain Farms, Inc. 3c. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME Benton STATE POSTAL CODE COUNTR' STATE POSTAL CODE COUNTR' STATE POSTAL CODE COUNTR' 2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTR' 2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTR' STATE POST	File with: Secretary of State, TX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1s or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b, leave all of item 1 blank, check here		P.O. Box 29071	TXTX					
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME 7M Cattle Feeders, Inc. 1b. INDIVIDUAL'S SURNAME 1c. MAILING ADDRESS 2c. TITY 1c. MAILING ADDRESS 2d. Mullins Lane 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTR' Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTR' COU	1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME	Ιı	Glendale, CA 91209-9071		1				
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME 7M Cattle Feeders, Inc. 1b. INDIVIDUAL'S SURNAME 1c. MAILING ADDRESS 2c. CITY Benton 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTR' 2a. ORGANIZATION'S NAME McClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTR' ADDITIONAL NAME(S)INITIAL(S) SUFFIX STATE POSTAL CODE COUNTR' COU	1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME	Įι	Eilo with: Socretary of State TV	/		THE ABOVE SDA	\CE S E(OP EII ING OFFICE I	ISE ONLY
name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME 7M Cattle Feeders, Inc. 1b. INDIVIDUAL'S SURNAME 1c. MAILING ADDRESS 2c. Mullins Lane 2c. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY Addendum (Form UCC1Ad) SUFFIX SUFFIX 3a. ORGANIZATION'S NAME FIRST PERSONAL NAME Benton CITY STATE POSTAL CODE COUNTRY ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC	name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To. ORGANIZATIONS NAME TM. Cattle Feeders, Inc. Tib. INDIVIDUAL'S SURNAME TID. INDIVIDUAL'S SURNAME TIR. INDIVIDUAL'S SURNAME TID. INDIVIDUAL'S SURNAME T		·		me: do not omit modify or				
TM Cattle Feeders, Inc. 1b. INDIVIDUAL'S SURNAME 1c. MAILING ADDRESS 1c. MAILING ADDRESS 2c. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Dename will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S/INITIAL(S)) SUFFIX CITY STATE POSTAL CODE COUNTR' ADDITIONAL NAME(S/INITIAL(S)) SUFFIX STATE STATE POSTAL CODE COUNTR' ADDITIONAL NAME(S/INITIAL(S)) SUFFIX CITY STATE POSTAL CODE COUNTR' ADDITIONAL NAME(S/INITIAL(S) SUFFIX CITY STATE POSTAL	7M Cattle Feeders, Inc. 1b. INDIVIDUAL'S SURNAME 1c. MAILING ADDRESS 824 Mullins Lane 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name; if any part of the Individual Debtor name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME MCClain Farms, Inc. OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY SUSA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo Agrif-inance LLC 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY SOURCE PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3c. ORGANIZATION'S NAME Rabo Agrif-inance LLC 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 3c. MAILING ADDRESS GTTY STATE POSTAL CODE COUNTRY P.O. Box 411995 St. Louis MO 63141 USA 4. COLLATERAL: This financing statement covers the following collateral:								
The individual's surname additional name (s)/initial(s) suffix 1c. Mailing address 1c. May address 1c.	1b. INDIVIDUAL'S SURNAME 1c. MAILING ADDRESS 1c. CITY								
1c. MAILING ADDRESS 1c. MAILI	1c. MAILING ADDRESS 1c. MAILING ADDRESS 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debto name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX CITY STATE POSTAL CODE COUNTRY BUT POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY BUT POSTAL CODE COUNTRY CITY STATE POSTAL CODE COUNTRY BUT PO	∩ D							
Benton KY 42025 USA 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Dename will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 2c. MAILING ADDRESS CITY Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC	824 Mullins Lane Benton KY 42025 USA 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY 824 Mullins Lane 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC OR 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY P.O. Box 411995 St. Louis MO 63141 USA 4. COLLATERAL: This financing statement covers the following collateral:	OK	1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Benton KY 42025 USA 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Dename will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 2c. MAILING ADDRESS CITY Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC	824 Mullins Lane Benton KY 42025 USA 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY 824 Mullins Lane 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC OR 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY P.O. Box 411995 St. Louis MO 63141 USA 4. COLLATERAL: This financing statement covers the following collateral:	_	444,040,450,000		OITY		07475	I DOOTH OODS	OOLINITDY.
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Dename will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 824 Mullins Lane Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC	2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. OR 2b. INDIVIDUAL'S SURNAME CITY Benton 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) USA 3c. ORGANIZATION'S NAME Rabo AgriFinance LLC 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY SUFFIX ADDITIONAL NAME(S)/INITIAL(S) SUFFIX SOLING ADDRESS CITY STATE POSTAL CODE COUNTRY P.O. Box 411995 4. COLLATERAL: This financing statement covers the following collateral:				_				
name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME McClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 824 Mullins Lane Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Rabo AgriFinance LLC	name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME MCClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME 2c. MAILING ADDRESS 2c. MAILING ADDRESS 3c. ORGANIZATION'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3c. ORGANIZATION'S NAME Rabo AgriFinance LLC OR 3c. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY Benton ADDITIONAL NAME(S)/INITIAL(S) SUFFIX STATE POSTAL CODE COUNTRY SUFFIX CITY STATE POSTAL CODE COUNTRY P.O. Box 411995 St. Louis MO 63141 USA						•		
2a. ORGANIZATION'S NAME McClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME Description	2a. ORGANIZATION'S NAME MCClain Farms, Inc. 2b. INDIVIDUAL'S SURNAME 2c. MAILING ADDRESS 2c. MAILING ADDRESS 2d. Mullins Lane 3s. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3s. ORGANIZATION'S NAME Rabo AgriFinance LLC OR 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX SUFFIX SUFFIX SUFFIX SUFFIX POSTAL CODE COUNTRY SUFFIX CITY STATE POSTAL CODE COUNTRY SUFFIX SUFFIX ADDITIONAL NAME(S)/INITIAL(S) SUFFIX SUFFIX P.O. Box 411995 St. Louis MO 63141 USA				· · · · · · · · · · · · · · · · · · ·				
2b. INDIVIDUAL'S SURNAME 2c. MAILING ADDRESS 2c. MAILING ADDRESS CITY Benton 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC	2b. INDIVIDUAL'S SURNAME 2c. MAILING ADDRESS CITY 824 Mullins Lane 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC OR 3b. INDIVIDUAL'S SURNAME CITY STATE POSTAL CODE COUNTRY 42025 USA 3r. ORGANIZATION'S NAME Rabo AgriFinance LLC OR 3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY P.O. Box 4111995 St. Louis MO 63141 USA 4. COLLATERAL: This financing statement covers the following collateral:			'					,
2c. MAILING ADDRESS 2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 824 Mullins Lane Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC	2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 824 Mullins Lane Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC OR 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 9. Box 411995 St. Louis MO 63141 USA 4. COLLATERAL: This financing statement covers the following collateral:		McClain Farms, Inc.						
824 Mullins Lane Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC	824 Mullins Lane Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC OR 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME CITY P.O. Box 411995 St. Louis MO 63141 USA 4. COLLATERAL: This financing statement covers the following collateral:	OR	2b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
824 Mullins Lane Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC	824 Mullins Lane Benton KY 42025 USA 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC OR 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME CITY P.O. Box 411995 St. Louis MO 63141 USA 4. COLLATERAL: This financing statement covers the following collateral:								
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME Rabo AgriFinance LLC	3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) Sa. ORGANIZATION'S NAME Rabo AgriFinance LLC	2c. l	MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
3a. ORGANIZATION'S NAME Rabo AgriFinance LLC	3a. ORGANIZATION'S NAME Rabo AgriFinance LLC 3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS CITY P.O. Box 411995 4. COLLATERAL: This financing statement covers the following collateral:	82	4 Mullins Lane		Benton		KY	42025	USA
Rabo AgriFinance LLC	Rabo AgriFinance LLC 3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS P.O. Box 411995 4. COLLATERAL: This financing statement covers the following collateral:	3. S	,	GNOR SECURI	ED PARTY): Provide only of	one Secured Party nar	ne (3a or 3l	p)	
OR .	3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS P.O. Box 411995 4. COLLATERAL: This financing statement covers the following collateral:								
	P.O. Box 411995 St. Louis MO 63141 USA 4. COLLATERAL: This financing statement covers the following collateral:	OR			FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	P.O. Box 411995 St. Louis MO 63141 USA 4. COLLATERAL: This financing statement covers the following collateral:								
3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTR	4. COLLATERAL: This financing statement covers the following collateral:	3c.	MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
P.O. Box 411995 St. Louis MO 63141 USA	· · · · · · · · · · · · · · · · · · ·	Ρ.	O. Box 411995		St. Louis		МО	63141	USA
4. COLLATERAL: This financing statement covers the following collateral:	All Assets	4. C	OLLATERAL: This financing statement covers the following collate	eral:				•	•
		5. C	heck <u>only</u> if applicable and check <u>only</u> one box: Collateral ishe	eld in a Trust (s	see UCC1Ad, item 17 and	Instructions) being	administe	ed by a Decedent's Pers	onal Representative
5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is ∏held in a Trust (see UCC1Ad, item 17 and Instructions) ∏being administered by a Decedent's Personal Represei	5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is ∏held in a Trust (see UCC1Ad, item 17 and Instructions) ∏being administered by a Decedent's Personal Represental	6a. (Check <u>only</u> if applicable and check <u>only</u> one box:			6b. C	Check only	if applicable and check o	only one box:
			Public-Finance Transaction Manufactured-Home Tra	ansaction	A Debtor is a Transmi	tting Utility [Agricult	ural Lien Non-U0	CC Filing
6a. Check only if applicable and check only one box: 6b. Check only if applicable and check only one box:	6a. Check only if applicable and check only one box: 6b. Check only if applicable and check only one box:	_	` ' ' ' '	Со	nsignee/Consignor	Seller/Buyer	Bail	ee/Bailor Lic	ensee/Licensor
6a. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/License	6a. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor		PTIONAL FILER REFERENCE DATA: :54657 0000030682				Mo	Clain Feed Yard, Inc	C.

UCC FINANCING STATEMENT ADDENDUM

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here ga. ORGANIZATION'S NAME 7M Cattle Feeders, Inc.			
9a. ORGANIZATION'S NAME			
I /M Cattle Feeders Inc			
TW Gattle I Godors, Inc.			
OR 9b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INITIAL(S) SUFFIX			
	E SPACE	E IS FOR FILING OFF	ICE USE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the F			
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c	Ŭ	, , , ,	, , , , , , , , , , , , , , , , , , ,
10a. ORGANIZATION'S NAME McClain Feed Yard, Inc.			
OR 10b. INDIVIDUAL'S SURNAME			
IUU. INDIVIDUALS SURNAIME			
INDIVIDUAL'S FIRST PERSONAL NAME			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX
10c. MAILING ADDRESS CITY	STATE	POSTAL CODE	COUNTRY
824 Mullins Lane Benton	KY	42025	USA
11. ADDITIONAL SECURED PARTY'S NAME OF ASSIGNOR SECURED PARTY'S NAME: Provide only			USA
11a. ORGANIZATION'S NAME	, <u>5115</u> 114111		
OR 145 INDIVIDUAL'S SUDMANE			
OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS CITY	STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	-		l
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT:			
	-extracted	collateral is filed as	a fixture filing
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): 16. Description of real estate:			
17. MISCELLANEOUS: 82554657-TX-0 8477 - RABO AGRIFINANCE Rabo AgriFinance LLC File with: Secretary of	State, TX	0000030682 McClain Fe	eed Yard, Inc.